

KEY

Handout 2

MH Teleconference, January 30, 2014

Motivational Interviewing, Part 2 of 2

In the demonstration from Part 1, you heard a session of MI with target behavior: alcohol. The audio was from the DVD: *Maximizing Brief Interventions for College Drinkers with Dr. Scott Walters* (2004).

Basic instructions: Using the transcript provided below, note the skill demonstrated by the clinician (Q = Question, R = Reflection) and if the client responded with Change Talk (yes/no).

Advanced instructions: Same as above, but track the type of Question (Open vs. Closed), type of Reflection (Simple vs. Complex), and type of client Change Talk (DARN CAT).

Coding abbreviations:
OQ – Open Question
CQ – Closed Question
Rs – Simple Reflection
Rc – Complex Reflection

Vignette #1: Pros & Cons

	Clinician	Q/R	Client	CT?
1	Well, tell me this, um, as you see it, what have been some of the good things about drinking for you?	OQ	Ah, it relaxes me, you know. Something, something to do. It's entertainment. Somebody gets drunk and makes a fool out of themselves, you get to laugh at them all night. Ya know, it's kinda fun.	
2	So, you mentioned winding down, relaxing. Ah, you also mentioned, the um, being with friends, being social.	Rc metaphor	Yeah...Yeah. Um. Inhibitions, you know, get lowered a little bit. It makes you able to do some stuff that you probably normally wouldn't do.	
3	Okay, having fun. What else? Some positive aspects for you.	Rs OQ	Yeah... It's all I can think of.	
4	Okay. So, you mentioned, ah you mentioned winding down earlier, you mentioned being with friends, ah, and ah, for just having a good time. And watching others get drunk. Yeah.	Rs	Yeah... Yeah, it's fun.	
5	And so, how about the flip side: in your experience, what have been some not-so- good things?	OQ – draws out Change Talk (Reasons)	Um, a couple of weeks ago I was at the bar, and I, uh, had a few too many to drink. You know, so, started real early and had a couple of shots to start. And uh, you know, was having a good time so just kept kinda kept drinking. I, uh, walked across the bar and was heading to the rest room because I wasn't feeling so good and didn't quite make it all the way. And, uh, needless to say, I got kicked out of the bar that night and I had to go home. That wasn't a very good time. But..	Reasons
6	Okay. So you sort of lost track of things in the middle there.	Rs	Yeah. I mean I just wasn't really paying attention to how I was feeling and I guess the shots caught up to me a little faster than I thought they would.	
7	Okay. So you threw up on the bar, and that ended your evening.	Rc	Yeah... Yeah. My friends stayed. I told them they were having a good time. So I didn't ruin their evening, luckily, but I had to leave and I couldn't go back to that bar for awhile.	Reason
8	Okay. A little embarrassing.	Rc - affective	Yeah, a little bit.	
9	So maybe that's one example of something that's not-so-good.	Rs	Yeah. That's definitely one.	

	Clinician	Q/R	Client	CT?
10	Give me another example, some of the less positive aspects.	OQ	Well, it's expensive sometimes... especially if you're out.	Reason
11	Okay. Money.	Rs	Yeah. If you're just sitting around with a six pack it's, you know, five, six bucks. That's nothing. But sometimes you go out and have eight or ten at the bar and it gets up, you know, to a forty dollar bill sometimes.	Reason
12	Yeah. Especially going out. It can be a lot of money. Yeah. What else?	Rs OQ – asks for more change talk	I guess I don't really know if it's related. I mean, it may have just been being depressed or whatever, but, you know, missing classes, maybe not doing as well in school.	Reason
13	Okay, so you're unsure whether there's a connection there.	Rs	Yeah. It could have just been, you know, from just being depressed a little bit. And, it may not have anything to do with it.	
14	Yeah. So you're seeing the, a little bit of missed school, missed class. And, at the same time, you're not sure whether that's, whether that was more related to alcohol, or...	Rs	Yeah, I have missed class from being hung over the night before. I guess, but you know, it's not something that's normal. The last couple of weeks have been, you know, pretty bad, but I haven't even really been going out that much. So, I don't know if it's really related.	
15	Okay. Hard to separate out the two, sounds like. The drinking and the depression.	Rs	Yeah, I mean I can't say that one caused the other. I mean, I've been drinking for a long time but, the depression's been recent.	
16	Okay. Okay. Those two are kinda wrapped up. At this point, it sounds like they're a little wrapped up.	Rc metaphor	Maybe a little bit.	
17	What are other, um, not-so-good things, in your opinion.	OQ – asks for more change talk	Uh, I mean, I almost got a couple of DUIs a little while ago and, luckily, you know, got let go, but that was a scary moment.	Reason
18	It was a near miss.	Rs	Yeah, I luckily just blew on the line and the cop was, you know, more than understanding.	
19	So, you're worried about what might have been... potential	Rc affective	Yeah, I mean... that could have been a very expensive weekend. That would have been my entire spending money for the entire semester.	Reason
20	Yeah. Yeah. And that makes you feel a little, um, I don't know what's the word?	CQ	Lucky.	
21	Lucky. A little lucky.	Rs	Yeah. Yeah, definitely lucky.	

Vignette #2: Importance & Confidence Rulers

	Clinician	Q/R	Client	CT?
1	Tell me this: on a scale of 1 to 10, how important is it for you to make a change in your drinking?	OQ	Uh, I mean, I guess about a 5.	
2	So, it's somewhere in the middle.	Rs	Yeah. I mean I haven't had any, you know, major, major issues so far and there's a couple of minor things I'd like to change. My, ah, drinking is way above the norm, so I think I'm definitely going to change a little bit. But I think, you know in general, I'm doing all right.	Commitment
3	Well I'm curious. Why a 5 and why not a 1?	OQ – asks for change talk	I mean, I'd kinda like to get down to, you know, being back at the normal level. I mean 97, or 93 rd percentile is a little bit high.	Desire Reason
4	Seems a little high.	Rs	Yeah. I don't like being that high. It just, I don't know, it bothers me.	Desire
5	To think of yourself as a more extreme drinker.	Rc – continue paragraph	Yeah.	
6	And that picture of an extreme drinker doesn't fit what you have in your head.	Rc	Yeah. I mean I picture the extreme drinker to be the guy who's gotten three DUIs, whose, you know, an alcoholic.	
7	But not you.	Rc	Not me. No.	
8	What are other reasons it's important for you.	OQ – asks for change talk	Ah, I mean, I don't know how important it is because I'm getting by all right, but, you know, having a little extra spending money for other things.	Reason
9	Okay. The money would be nice.	Rs	Yeah. I mean it would be nice. It's not imperative because I have it. But, you know.	
10	That's a small part of it.	Rc amplification	Yeah. It would be nice to have a few, few extra dollars, you know, to go out to eat at a nice restaurant every once in a while or something.	Reason

11	Sure. Sure. Give me another reason. Why a 5, why not a 1?	OQ – asks for change talk	I have had a few, you know, minor problems, and you know maybe, maybe with the depression thing, if you know, that is indeed wrapped up with it, you know maybe that's a good reason to change a little bit.	Reason
12	So, to whatever extent the drinking is wrapped up in the depression, you're a little, interested in finding out.	Rs	Yeah. I mean, with the Wellbutrin I'm pretty sure you're really not supposed to drink on that, so uh, that probably wouldn't be too good.	Reason
13	So you're a little concerned about the interaction with the medication as well.	Rc - affective	Yeah. That might not be a very good thing.	
14	All right. Well, let me ask you this: ah, same scale 1 to 10, how confident are you that you can make a change in your drinking, if you wanted to.	OQ	Oh, I'd say a 10.	
15	So very confident.	Rs	Oh yeah. I mean I'm almost certainly going to , you know, cut out those weekday episodes, or at least, you know cut back, uh, you know, see, see if that gets me back down to, closer to the normal range.	Commitment
16	Yeah. So you think it would be pretty easy for you.	Rs	Oh yeah.	
17	How would you do it?	OQ	I guess cut back on those [inaudible]. Maybe pay a little bit more attention on the weekends, how much I'm drinking. Ah, I don't know.	
18	We talked about some of the difficult situations for you. Um, being at a bar, being with friends, um you know, watching TV. In those difficult situations for you, how will you handle it?	OQ	It might be a little hard at first. People might give me a hard time about cutting back because they, uh, I think identify me with that person that, you know, is always there to drink with them. And uh, you know, if I either don't go over, or you know, just go over and just drink soda, you know, they may uh...	Sustain Talk
19	They may wonder what's going on.	Rc continue paragraph	They may start razzing me a little about it. And it'll be a little hard at first, but I think they'll understand.	Sustain Talk
20	Because they're your friends.	Rc	Yeah. Absolutely.	
21	And you believe they're real friends.	Rs	Yeah. They've been there for me in the past and, you know, they'll be there for me again.	

22	So, how will you handle yourself then in that situation? Uh, you decided that, you know, let's say you just wanted to have a drink or two, how will you go about that?	OQ	Well, I'd just, you know, keep track of it. I guess...	
23	Counting. Keeping track.	Rs	Yeah. Yeah, I mean if I only have one or two it's not like I'm going to forget that I had one or two. You know, it's when I get up to the eight or nine, you know, in that region -- sometimes you just forget how many you've had.	Commitment
24	Yeah. So for you, it's a lot easier to know how much you've had and to maybe even to say no when you've just had a drink or two than it is to, if you've had several drinks in a row.	Rs	Yeah.	
25	Yeah. Well, I think your importance is in the moderate range, and you've listed a number of reasons why it's important to you: um, the ah, cost savings, the possible connection with the depression, which you're still a little unsure about. Ah, the, ah, ah, the possible interaction with the medication. And ah, but the biggest thing was just not see yourself as a, uh, as a extreme drinker. It's, ah, a little disturbing, um, to see yourself in that way. Um, so, at the same time you're pretty confident you can reduce the amount you're drinking. And, um, you mentioned just keeping track of how much you're consuming. You mentioned just skipping a couple of the episodes during the week, just sort of curbing things on the weekend a little bit. And you thought that it would be pretty easy for you to do that.	Rs summary	Yeah. I think it would be easy to change a little bit. You know, if I, if you said stop drinking all together, that might be a different story.	
26	That would be more hard for you.	Rs	Yeah. But, you know, cutting a few out here and there I don't think will be a problem at all.	Commitment

27	Well, since you're confidence is high, you're, ah you're at a really good place. You're one of those people who are most likely to make successful changes, ah, because you seem to have very good resources; you seem to be focused and to know what you want; and you seem to have a good support system that you think will look after you and support your decision to be more moderate in the way that you approach that.	Affirmation	Ah huh.	
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For the clinician behavior in Vignette #2, please count the skills and note the following:

Open questions = 8

Closed questions = 0

Total questions = 8

Simple reflections = 11

Complex reflections = 7

Total reflections = 18

Total skill counts (Vignette #1 + Vignette #2)

Open questions = 14

Closed questions = 1

Total questions = 15

Simple reflections = 23

Complex reflections = 12

Total reflections = 35